FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)		Off	Office use only	
NAME OF COMMITTEE (in f	(Check if nam is changed)	e Example: If typying, type over the lines	12FE4M5		
OCPAC					
ADDRESS (number and s	976 Pacific Aver	nue			
(Check if address is changed)			CA L	95988 9788	
COMMITTEE'S E-MAI		CITY	STATE▲	ZIP CODE 📥	
	PAGE ADDRESS (URL)				
			111111		
COMMITTEE'S FAX N	UMBER				
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2. DATE 0 1	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFICA	TION NUMBER	C C00424358			
4. IS THIS STATEM	ENT X NEW (N)	AMENDED (A)			
I certify that I have examine Type or Print Name of	Kallad and a	ny knowledge and belief it is true, correc	t and complete		
Signature of Treasurer	Electronically Filed by Kelly	Lawler	Date 01	17 / Y Y Y Y Y Y Y	
NOTE: Submission of fal	·	on may subject the person signing this S	•	of 2 U.S.C. S437g.	
Office Use Only		For further informatic Federal Election Comm Toll Free 800-424-953 Local 202-694-1100	nission	FEC FORM 1 (Revised 02/2003)	